



Serial No. 09/692312  
Docket : 33216 M 059

Attorney Docket  
33216 M 059

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant : Tadashi Ono, et al.  
Serial No. : 09/692,312 Art Unit : 2613  
Filed : October 20, 2000 Examiner : Duggins, A  
For : Data Recording Apparatus, Medium and Information Package

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**RESPONSE TO OFFICE ACTION** Technology Center 2600

Commissioner for Patents  
PO Box 1450  
Alexandria, VA 22313-1450

This is in response to the Office Action mailed January 2, 2004 regarding the above identified patent application.

REMARKS begin on page 2.



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1-22-04  
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<b>TRANSMITTAL FORM</b>  <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/692,312	
	Filing Date	October 20, 2000	
	First Named Inventor	Tadashi Ono, et al.	
	Art Unit	2613	
	Examiner Name	Duggins, A	
Total Number of Pages in This Submission		Attorney Docket Number	33216 M 059

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment / Reply  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		<b>RECEIVED</b>  JAN 21 2004  Technology Center 2000

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Michael A. Makuch, Reg. 32,263
Signature	
Date	January 20, 2004

CERTIFICATE OF MAILING			
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